

Form CPF M 102: Campaign Finance Report **Municipal Form**

Office of Campaign and Political Finance

	Office of Car	mpaign and I	Political Finance	1000 HB 4RG C	
Commonweal of Massachuse			i e	: City or Town-Clerk or E	
OI Massachuse	OUS .		~~~~		ilection Commission
Fill in Re	porting Period dates: Beginning Date: Aug	25, 2013	Ending Date:	Oct 18, 2013	<u> </u>
Type of F	Report: (Check one)				
	preceding preliminary	☐ 30 day a	fter election y	vear-end report	dissolution
			1/ -> ~1		
54	Candidate Full Name (if applicable)		nmitter To El	mittee Name	7
Car	reclos at lack		Cynthia H	اجع	
	Office Sought and District		Name of Co	ommittee Treasurer	
30	Shawna St. Fitchburg MA Residential Address	30	Shawna 51.	Fitchlass, se Mailing Address	MA
Telephone N	fumber (optional): 478-348-1263	Telephone	Number (optional): 47	8-348-(243	
	SUMMARY BALAN	CE INFO	RMATION:		
		, , , , , , , , , , , , , , , , , , , ,		- 01	
	Line 1: Ending Balance from previous report		5 (05.91	i
	Line 2: Total receipts this period (page 3, line 1	1)	3,5	50.00	
	Line 3: Subtotal (line 1 plus line 2)	÷	4,05	5.91	
	Line 4: Total expenditures this period (page 5,	line 14)	2,87	13,03]
. "	Line 5: Ending Balance (line 3 minus line 4)		1,182	2.88	<u> </u>
	Line 6: Total in-kind contributions this period	(page 6)	φ]
	Line 7: Total (all) outstanding liabilities (page	7)	Ф		<u> </u>
	Line 8: Name of bank(s) used:	ordit 1	Inion		
I certify that activity, inc finance activity	f Committee Treasurer: t I have examined this report including attached schedules and it is, to the luding all contributions, loans, receipts, expenditures, disbursements, in-kyity of all persons acting under the arthority or on behalf of this committee the penalties of perjury:	ee in accordance	S AUG HAOMHUES for mus repo	G.L. c. 55.	Il campaign finance ats the campaign
Candi Certif activity incurre	NDIDATE FILINGS ONLY: Affidavit of Candidate: (check date with Committee and no activity independent of the committee fly that I have examined this report including attached schedules and it is, y, of all persons acting under the authority or on behalf of this committee ed any liabilities nor made any expenditures on my behalf during this reputidate without Committee OR Candidate with independent activity fill	to the best of my in accordance w orting period.	orf		
I certif	fy that I have examined this report including attached schedules and it is, e activity, including contributions, loans, receipts, expenditures, disburse aign finance activity of all persons acting under the authority or on behalf	to the best of my	knowledge and belief, a ut		
	der the penalties of perjury:		(Candidate's sig	T	10-25-13
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SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
GATE.	Ray Daves	-65.00	
10-4-13	Dr. Babineau	100.00	
9-27-13	Ron Boudrasd	250.00	
9-27-13	James Cours	(00.00)	
9-27-13	Ray Davia	(00.00	
9-27-13	Ron Feldman	100.00	
10-4-13	John Helsest	100.00	
9-27-13	Shawa Keating	(00.00	
10-4-13	Mark Louvey	100.00	
9-27-13	Ernix Magoy	100.00	
9-27-13	Dave McCafford	60.00	
9210-4-13	Masty Manyrasod	(00,00	
Line 9: Total Rec	eipts over \$50 (or listed above)	1,350.9	9
	ceipts \$50 and under* (not listed above)	2,200.0	<u> </u>
	RECEIPTS IN THE PERIOD	3,550.0	Enter on page 1, line 2 buld include only those receipts not itemized above.

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Rec	eipts over \$50 (or listed above)	NA	
Line 10: Total Re	ceipts \$50 and under* (not listed above)	RA	
Line 11: TOTAI	RECEIPTS IN THE PERIOD	NR	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9-12-13	Post Office	Main St. Fitchboy	Stamps	93,00
9-12-13	Staples	Leonunta	Envelopes -Labbes	54.9(
9-14-13	Post Office	Menst Fitchbog	Langs	92.00
9-15-13	Staples	Leoneusta	Evelopes + Lables	27.60
10-4-13	Wass-Asthur	Fitchboog	Lewu Sigus	410,94
10-4-13	Fitch Gentrud	Fitchborg	Newpaper Adds	500.∞
10-4-13	Fitch Senturel	Fitchboos	Bp.Up On-Line	ै7(५.००
10-5-13	Carleyes	Fitchburg	IslandFlowers	70.00
105-13	wrkz	Fitzlikas	Adds	600,00
10-16-13	Nich Coodio	Fitchburg	Web-Rage & 6- Had	(00.00
10-14-13	Staples	Leoningter	Flash Drive	8.40
<u> </u>	-11	Line 12: Total Expenditures	over \$50 (or listed above)	
		Line 13: Total Expenditures	\$50 and under* (not listed above)	
	Enter on page 1, line 4	→ Line 14: TOTAL EXPEND	ITURES IN THE PERIOD	2,873.

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4 above.

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
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	Address of the second of the s			
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	<u> </u>			
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ļ				
-		Line 12: Expenditures over	\$50 (or listed above)	Au
		Line 13: Expenditures \$50 a	nd under* (not listed above)	NA
	· · · · · · · · · · · · · · · · · · ·	Line 14: TOTAL EXPENI	DITURES IN THE PERIOD	NA

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
and the state of t				
		Line 15: In-Kind Contribution	ons over \$50 (or listed above)	\$
		Line 16: In-Kind Contribution	ns \$50 & under (not listed above)	ϕ
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND	CONTRIBUTIONS	0

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
	Enter on page 1 line 7 -	Line 18: TOTAL OUTSTA	NDING LIABILITIES (ALL)	10

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